

Student Accommodation Application Form 2019

Student Information

Full Names and Surname:			-
Identity Number:			_
Cell Phone number& Email Address: _			_
Present Home address:			
Postal address:			
Present landlord:			
Tertiary Institution:			
Student No:			
Gu	ardian/ Pare	nt Information	
Full Names and Surname:			-
Identity Number:			
Cell Phone Number& Email Address:			
mployer: Tel No:			
Work address:			<u>.</u>
Occupation:	Period:	Monthly incon	ne: R
Relative not living with you:		Tel no:	
Relationship with you:		_	
I hereby apply for accommodation su	bject to terms ar	d conditions stated herei	n.
Signed by applicant (Name)		Signature	Date
I acknowledge that I take full respons conditions of the lease agreement to	-		•
Signed by parent (Name)		Signature	Date
NB: Please Attach the following documents income, bursary letter where applical	ments: copy of IE		

Account Name: Property Payment Solutions Bank Name: ABSA Account Number: 4094670051 Branch

code: 632005 Reference: Name & Surname